

Appendix B HIIC 2008 Work Plan

Introduction

The King County Children's Health Initiative is a collaborative partnership dedicated to improving the health status of children by increasing their access to medical, dental, and mental health care. The initiative enrolls children in publicly-funded health insurance programs and connects them to medical and dental homes where they receive the care they need.

As of 2008, its second year of operation, the Children's Health Initiative is a fully-functioning public-private partnership. King County launched the initiative in May 2007 with a three-year commitment of funds (\$1M per year) to enroll children in publicly-funded health insurance programs and link them to health care services. During 2007 twenty private sector partners joined the initiative with financial commitments totaling another \$3M for the three-year time period 2007-2009. These funds will support the implementation of three innovative pilot projects:

- An oral health pilot that will link children 250%-300% FPL to a regular source of dental care
- An online enrollment pilot that will enable families and outreach staff to enroll children in publicly-supported health insurance programs over the Internet
- A mental health/primary care integration pilot that will bring together key health and mental health services for children

Oversight of the three pilot projects will reside with the Health Innovation Implementation Committee, an impressive group of health care leaders and advocates. Convened in 2007 to guide the development of the pilot projects, the committee will focus its efforts in three key areas in 2008:

- Ensuring that the pilot project evaluations proceed as designed
- Guiding the implementation of the pilot projects
- Advocating for progress at the state and federal levels to improve access, financing, and service delivery for children's health care

The committee will meet four times during 2008. The work plan that follows outlines the timing, focus areas, and likely materials available at each committee meeting. Staffing for the committee is provided by the staff of Public Health – Seattle & King County.

For additional information regarding each of the pilots, the 2007 King County Council Motion authorizing the Children’s Health Initiative, and other background materials, please see the appendix.

Task or Activity	Agenda Focus	Key Materials for Meeting
2008 Committee Meetings		
February 2008 Meeting	<ol style="list-style-type: none"> 1. 2008 evaluation plans and data collection schedules 2. Pilot project implementation updates 3. Outreach and Access Project update 4. Advocacy issues and activities at the state and federal levels 5. Work plan for Alignment activities 	<p>2008 Evaluation Plans and Data Collection Schedules</p> <p>2008 Implementation Updates for Pilot Projects</p> <p>2008 Progress Report for Outreach and Access Project</p> <p>2008 Status Reports for Advocacy and Alignment Activities</p>
May 2008 Meeting	<ol style="list-style-type: none"> 1. Progress report on pilot project evaluation efforts 2. Updates on pilot projects implementation activities 3. Outreach and Access Project update 4. Update on Advocacy issues and activities at the state and federal levels 5. Update on Alignment work 	<p>Status Report on Evaluations</p> <p>2008 Implementation Updates for Pilot Projects</p> <p>2008 Progress Report for Outreach and Access Project</p> <p>2008 Status Reports for Advocacy and Alignment Activities</p>
July 2008 Meeting	<ol style="list-style-type: none"> 1. Review and discussion of 2008 CHI Evaluation Report (prior to August 15 submittal to King County Council) 2. Updates on pilot project implementation activities 3. Outreach and Access Project update 4. Update on Advocacy issues and activities at the state and federal levels 5. Update on Alignment work 	<p>Draft 2008 Evaluation Report</p> <p>2008 Implementation Updates for Pilot Projects</p> <p>2008 Progress Report for Outreach and Access Project</p> <p>2008 Status Reports for Advocacy and Alignment Activities</p>

Task or Activity	Agenda Focus	Key Materials for Meeting
2008 Committee Meetings (Cont'd)		
October 2008 Meeting	<ol style="list-style-type: none"> 1. Review and discussion of 2009 pilot project work plans 2. Updates on pilot project 2008 implementation activities 3. Outreach and Access Project update 4. Update on Advocacy issues and activities at the state and federal levels 5. Update on Alignment work 	<p>2009 Pilot Project Work Plans (Online Enrollment and Mental Health Integration)</p> <p>2008 Implementation Updates for Pilot Projects</p> <p>2008 Progress Report for Outreach and Access Project</p> <p>2008 Status Reports for Advocacy and Alignment Activities</p>

Appendix B

HIIC Measurement & Evaluation Status Report, February 2008

Introduction

The May 7, 2007 King County Council Motion, adopting policies and a measurement and evaluation plan for the Children's Health Initiative, laid out a vision, mission and goals that set the stage for evaluation of advocacy, outreach, and health innovation pilot project efforts to improve the health of children in King County.

Vision and Mission

King County's vision is for every child in King County to achieve optimal health and grow into a healthy adult. Recognizing that regular access to health care is necessary to achieving optimal health, the mission of the county's Children's Health Initiative is to create conditions under which children have consistent access to comprehensive, preventive-focused primary health care prioritizing those activities which will have the most significant impact on health or reduction in health disparities.

Goals

- 1) Advocacy goals:
 - a) Ensure that the state fulfills its adopted goal to extend health care insurance coverage to all children by 2010
 - b) Ensure that the state fulfills its goals to connect children to a medical home and assure that high-quality, cost-effective care is provided
- 2) Outreach goals:
 - a) Improve insurance access by increasing the number of insured children by identifying and enrolling eligible children in public insurance projects
 - b) Improve health knowledge by training parents and staff at community agencies to identify children's health problems and encourage families to seek preventive care
 - c) Improve access to health care by connecting children to regular sources of medical and dental care
 - d) Improve health status by ensuring that children receive appropriate evidence-based preventive health care services
- 3) Health innovation pilot projects goals:
 - a) Ensure that children receive appropriately integrated services for the mouth, the mind, and the body by strengthening linkages in the health care system
 - b) Reduce barriers children face in accessing health care services by developing systems that assure children receive timely coordinated preventive care
 - c) Leverage current opportunities to build evidence for future state-funded efforts by demonstrating innovative approaches and measuring effectiveness with carefully designed and implemented evaluations

The Council Motion stipulates that semiannual and annual measurement and evaluation reports be created to summarize progress on reaching the CHI vision, mission, and goals. This report for the Health Innovation Implementation Committee (HIIC) provides information on evaluation activities to-date and an update on the status of the pilot projects for which the committee has oversight. Included in the report are:

- Revised evaluation plan for the Online Enrollment Pilot Project, reflecting revisions to the draft plan reviewed by the committee in November 2007, detailing the data collection methods and updating the reporting schedule to align with 2008 requirements for council reporting
- Evaluation plan for the Mental Health/Primary Care Integration Pilot Project, without revision as the staff member from the King County Department of Community and Human Services responsible for evaluation of the Veterans and Human Services Levy has only recently come on board
- Revised evaluation plan for the Oral Health Pilot Project, reflecting revisions to the draft plan reviewed by the committee in November 2007 and detailing data reporting and analysis schedule in preparation for the August 2008 council report
- The evaluation plan developed for the collective work of Health Innovation Implementation, covering the three pilot projects under the auspices of the HIIC – Online Enrollment, Mental Health/Primary Care Integration, Oral Health – and alignment with state activities
- Brief updates on the current status of the pilot projects

Online Enrollment Pilot: Evaluation Plan			
Pilot Project Goal: To facilitate families in applying and staying enrolled in public coverage and linking to medical and dental homes by supporting web-based processes that reduce barriers children face in accessing health care services, specifically those related to the paper application and enrollment process			
Outcomes	Measures	Data Collection Method and Source	Data Reporting and Analysis
ParentHelp123.org establishes an electronic link to allow families the ability to submit applications to the state electronically	ParentHelp123's electronic submission feature is functional	Verification	Deliverable date
Families are able to submit health/dental care coverage applications for their children online	Number of submitted applications for children under 19 (by site, by region in King County, and by ethnic group) Number of accepted applications for children under 19 (by site, by region, and by ethnic group)	ParentHelp123.org website data	June 08 summary on progress for August 08 report (Numbers for late 2008 and 2009)
		Family interviews	TBD
Outreach and application workers are able to use the "super user" version of ParentHelp123 to submit health/dental care coverage applications for their clients	Number of outreach and application workers that use, "subscribe", or have a log-in to the super user version Number of children whose applications are submitted and approved by outreach and application workers via ParentHelp123.org (by site, by region, and by ethnic group)	ParentHelp123.org website data	June 08 summary on progress for August 08 report (Numbers for late 2008 and 2009)
		Outreach and application worker interviews	Super user design input summary in June 08

Online Enrollment Pilot: Evaluation Plan (Cont'd)			
Outcomes	Measures	Data Collection Method and Source	Data Reporting and Analysis
Families enroll their children in the new WDS dental program	Number of children that are referred to the WDS dental program website via ParentHelp123.org	ParentHelp123.org and WDS website data	June 08 summary on progress for August 08 report

Mental Health/Primary Care Integration Pilot: Evaluation Plan			
Pilot Project Goal: To promote the healthy social and emotional development of underserved children in King County ages birth to 12			
Outcomes	Measures	Data Collection Method and Source	Data Reporting and Analysis
Clinical Outcomes			
Improve mental health status and functioning ^{1,2,3,4}	Results of clients' periodic screening over time: PHQ-2; PHQ-9; GAD-7 (anxiety); ASQ-SE; Pediatric Checklist	To be negotiated with pilot sites	To be negotiated with pilot sites
Improve clients' capacity to reduce risk and address early symptoms of depression ⁴	# (%) Clients attending peer support groups or receiving other early intervention strategies during pregnancy or early in parenting years (0-3 years)	To be negotiated with pilot sites	To be negotiated with pilot sites
	# (%) children/and or their parents attending peer support groups or receiving other early intervention strategies	To be negotiated with pilot sites	To be negotiated with pilot sites
Process Outcomes			
Improve access to standardized depression screening ^{1,3,4}	# (%) mothers receiving depression screening at prenatal, postpartum, and well child visits (for mothers of birth to age three children)	To be negotiated with pilot sites	To be negotiated with pilot sites

1. Consistent with NCCBH Primary Care-Mental Health Collaborative
2. Consistent with GA-U Mental Health – Primary Care Integration Pilot

3. Consistent with Veterans and Human Services Levy – Access Pilot
4. Consistent with Veterans and Human Services Levy – Maternal Depression Pilot

Mental Health/Primary Care Integration Pilot: Evaluation Plan (Cont'd)			
Outcomes	Measures	Data Collection Method and Source	Data Reporting and Analysis
Process Outcomes (cont'd)			
Improve access to standardized depression screening ^{1,3,4} (continued)	# (%) of children ages birth to twelve who received standardized mental health screening at well child visits	To be negotiated with pilot sites	To be negotiated with pilot sites
Improve linkage to specialty mental health services ^{1,2}	Increased primary care practice tracking and follow up assessments for children and families who are referred to mental health specialists for care	To be negotiated with pilot sites	To be negotiated with pilot sites
Assure access ^{3,4}	Demographic profile of clients served in pilot projects: Race/Ethnicity; Residence; Age; Insurance Status; Foster care/Intact family	To be negotiated with pilot sites	To be negotiated with pilot sites
Infrastructure Outcomes			
Improve capacity to treat mental health issues in the primary care setting ^{1,2,3,4}	# (%) clients receiving treatment and follow-up through integrated behavioral health programs	To be negotiated with pilot sites	To be negotiated with pilot sites
	# visits per client	To be negotiated with pilot sites	To be negotiated with pilot sites
	Increased numbers of primary care providers trained to identify, treat, and facilitate referrals for children with mental health issues	To be negotiated with pilot sites	To be negotiated with pilot sites

1. Consistent with NCCBH Primary Care-Mental Health Collaborative
2. Consistent with GA-U Mental Health – Primary Care Integration Pilot

3. Consistent with Veterans and Human Services Levy – Access Pilot
4. Consistent with Veterans and Human Services Levy – Maternal Depression Pilot

Oral Health Pilot: Evaluation Plan			
Pilot Project Goal: To facilitate the expansion of oral health coverage for underserved children in King County			
Outcomes	Measures	Data Collection Method and Source	Data Reporting and Analysis
Increased access to and use of dental services for children in families between 250% - 300% of FPL	1) # of children enrolled in the program 2) # of children in program who access services 3) Type of services delivered: preventive vs. restorative 4) Number of participating dental providers 5) Cost of services delivered	WDS and TPA* will establish a database to track children enrolled in the program / WDS has existing database to track which enrollees access services, the type and cost of services delivered	Data will be routinely collected on an ongoing basis (June 08 summary for August 08 report) End of year data update
Successful outreach strategies identified and employed	1) # of children enrolled in program by outreach source 2) # of children in program identified as under income and referred to CHI outreach team	KC Kids Dental program website's data reports	Data will be routinely collected by WDS (June 08 summary for August 08 report) End of year data update
Improved administrative ease of processing claims and reimbursing providers for services delivered	1) Provider satisfaction survey	WDS will develop and administer a survey for participating dentists of this survey	Survey developed by June 2008 Conduct survey in November 2008

Oral Health Pilot: Evaluation Plan			
Pilot Project Goal: To facilitate the expansion of oral health coverage for underserved children in King County			
Outcomes	Measures	Data Collection Method and Source	Data Reporting and Analysis
Program elements of high value to families: <ul style="list-style-type: none"> • High number of service access points • Lack of 'public program' stigmatization • Ease of web site enrollment • Access to program information 	1) Family satisfaction survey	WDS will develop and administer a survey for families who enroll online	Survey developed by June 2008 Conduct survey in November 2008
Utilization analysis by type of service delivered	1) Comparison of utilization Data by type of service compared across KC Kids Dental Program, Medicaid and private providers	WDS	June 08 summary for August 08 report End of year data update

**Third Party Administrator*

Health Innovation Implementation: Evaluation Plan

Pilot Project Goals:

- 1) To ensure that children receive appropriately integrated services for the mouth, the mind, and the body
- 2) To reduce the barriers children face in accessing health care services
- 3) To leverage current opportunities to build evidence to support future state-funded efforts

Outcomes	Measures	Data Collection Source	Data Reporting and Analysis
Client Outcomes		Data will come from relevant project evaluation reports as noted below	Analyze results through June 08 for August 08 report End of year data update
Increased use of medical, dental, and behavioral health care services dental services for children in families 250% - 300% of FPL	# of enrolled children who obtain services	WDS Health Department (Mental Health Integration)	Analyze results through June 08 for August 08 report End of year data update
Increased equity of access to medical, dental, and behavioral health services	Demographic profile of clients served in pilot projects: Race/Ethnicity; Residence; Age; Insurance Status; Foster care/Intact family	WDS Health Department (MH Integration and Online Enrollment)	Analyze results through June 08 for August 08 report End of year data update
Families are able to submit health/dental care coverage applications for their children online	Number of submitted applications for children under 19 (by site, by region in King County, and by ethnic group) Number of accepted applications for children under 19 (by site, by region, and by ethnic group)	Health Department (Online Enrollment)	Analyze results through June 08 for August 08 report End of year data update

Health Innovation Implementation: Evaluation Plan (Cont'd)			
Outcomes	Measures	Data Collection Source	Data Reporting and Analysis
Client Outcomes (cont'd)			
Improved mental health status and functioning among children enrolled in program	Results of clients' periodic screening over time: PHQ-2; PHQ-9; GAD-7 (anxiety); ASQ-SE; Pediatric Checklist	Health Department (MH Integration)	Analyze results through June 08 for August 08 report End of year data update
Improved client capacity to reduce risk and address early symptoms of depression	# (%) clients attending peer support groups or receiving other early intervention strategies during pregnancy or early in parenting years (0-3 years)	Health Department (MH Integration)	Analyze results through June 08 for August 08 report End of year data update
System Linkages/Integration		Data will come from relevant project evaluation reports as noted below	Analyze results through June 08 for August 08 report End of year data update
Increased participation of dental providers in services for children in families between 250% and 300% FPL	# of participating dental providers % of dental providers who agree to participate as compared to all dental providers	WDS	Analyze results through June 08 for August 08 report End of year data update
ParentHelp123.org establishes an electronic link to allow families the ability to submit applications to the state electronically	ParentHelp123.org's electronic submission feature is functional	Health Department (Online Enrollment)	Analyze results through June 08 for August 08 report End of year data update
Improved linkage to specialty mental health services	Increased primary care practice tracking and follow up assessments for children and families referred to mental health specialists for care	Health Department (MH Integration) evaluator	Analyze results through June 08 for August 08 report End of year data update

Health Innovation Implementation: Evaluation Plan (Cont'd)			
Outcomes	Measures	Data Collection Source	Data Reporting and Analysis
Alignment with State Actions		Data will come from relevant project evaluation reports as noted below	Analyze results through June 08 for August 08 report End of year data update
Successful outreach strategies identified and employed	1) # of children enrolled in program by outreach source 2) # of children in program identified as under income and referred to CHI outreach team	KC Kids Dental program website's data reports	Analyze results through June 08 for August 08 report End of year data update
Improved administrative ease of processing claims and reimbursing providers for services delivered	Provider satisfaction survey	WDS will develop and administer a survey for participating dentists	Analyze results through June 08 for August 08 report End of year data update
Increased access to and use of dental services for children in families above 300% FPL who take advantage of the buy-in option	# of families enrolled in program # of children who access services Type of services delivered	WDS	Analyze results through June 08 for August 08 report End of year data update
Improved capacity to treat mental health issues in the primary care setting	# of clients receiving treatment and follow-up through integrated behavioral health programs Average # of visits per client Increased #'s of primary care providers trained to identify, treat, and facilitate referrals for children with mental health issues	Health Department (MH Integration)	Analyze results through June 08 for August 08 report End of year data update

Health Innovation Implementation: Evaluation Plan (Cont'd)			
Outcomes	Measures	Data Collection Source	Data Reporting and Analysis
Alignment with State Actions (cont'd)			
Outreach and application workers are able to use the "super user" version of ParentHelp123.org to submit health/dental care coverage applications for their clients	<p># of outreach and applications workers that use, "subscribe," or have a log-in to the super user version</p> <p># of children whose applications are submitted by outreach and applications workers via ParentHelp123.org (by site, by region, by ethnic group)</p> <p>% of applications submitted online as compared to all applications</p>	Health Department (Online Enrollment)	<p>Analyze results through June 08 for August 08 report</p> <p>End of year data update</p>

Project Updates

Online Enrollment Pilot

Health Department staff are working with WithinReach staff to take the first steps in implementing the 2008 work plan for adding online enrollment capacity. Dates for deliverables in the work plan are being revised to reflect the timing of funds accepted and appropriated for the pilot projects. The workplan timelines are being revised back by one to two months to reflect this timing. WithinReach and the staff of One-e-App are planning a site visit to inform the development of the super user project in the second half of March 2008. Next steps include finishing the contracting process so that work can proceed.

PHSKC and WithinReach staff have been participating in the Business Requirements and Technical Requirements design of the DSHS Online Services Application Project (OSAP) throughout the fall and winter. DSHS has completed draft business requirements which are currently under review. DSHS will review a new online application website prototype in March and April for the following programs: cash assistance (TANF), basic food (food stamps), children's medical, pregnancy medical, adult medical, nursing home, COPES/Assisted Living or In-Home Care, drug and alcohol treatment, and child care. DSHS intends to debut the new online application website in July 2008. See the DSHS Timeline for Online Enrollment in the appendix for more detail.

Mental Health/Primary Care Integration Pilot

Health Department planning with King County Department of Community and Human Services staff who are working on the Veterans and Human Services Levy is underway. An evaluation coordinator for the Levy has been hired and will be responsible for oversight of evaluation activities, including the Mental Health/Primary Care Integration Pilot. A pre-RFP notice was sent to a wide network of providers on December 17, 2007 with a copy of the VHS maternal depression procurement plan. The RFP is currently under health department review and should be released by mid-February 2008. Sites will be chosen in April 2008, with staffing and training occurring in May and June.

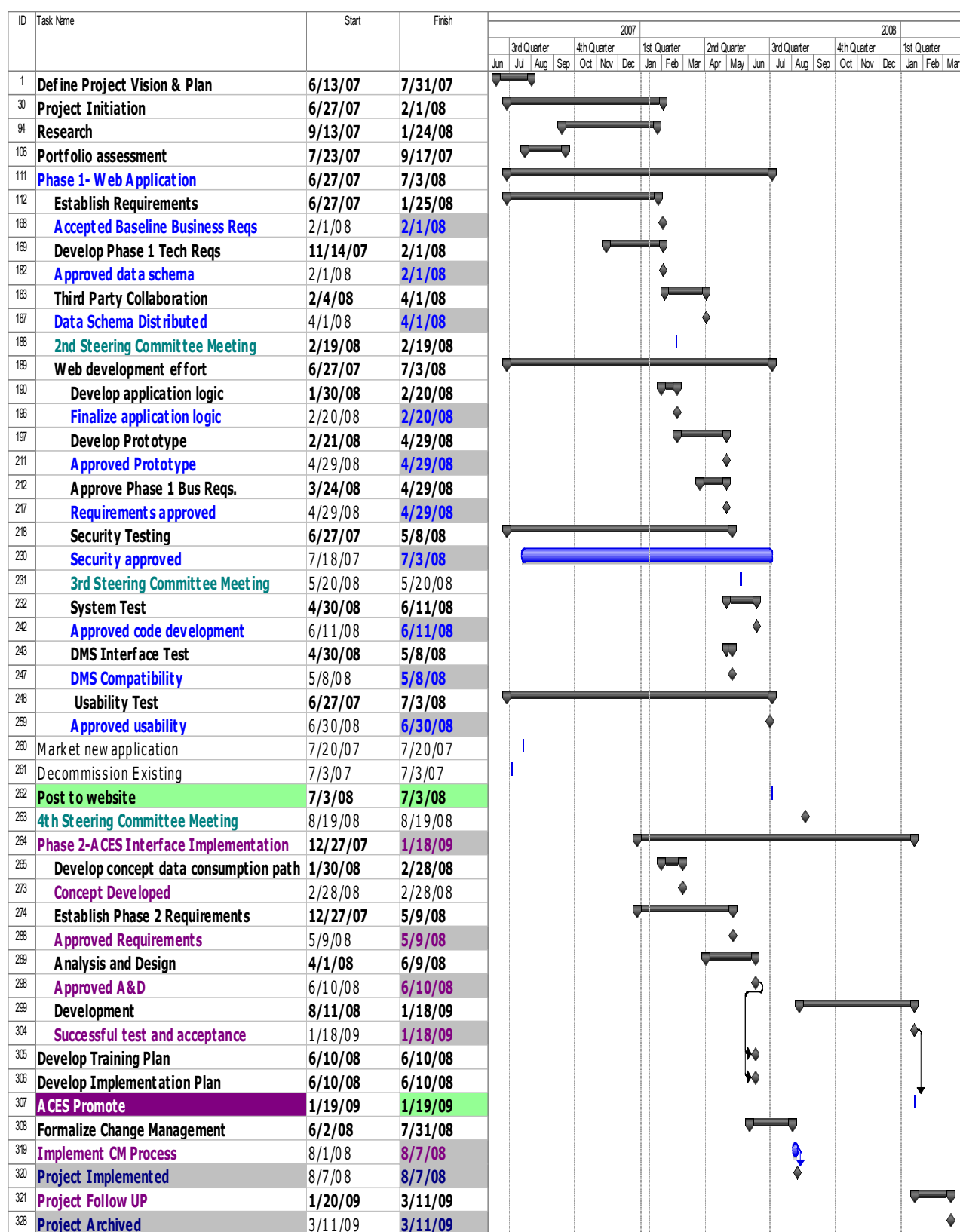
The set of outcomes for the combined VHS maternal depression/CHI children's mental health was created and sent to potential bidders with the pre-RFP notice. See following page.

Outcomes / Performance Measures in Piloting Maternal Child Behavioral Health Services – December 17, 2007	
Outcomes	Performance Measures
Improve access to depression screening for mothers and their children	Clients screened periodically through <i>First Steps</i> and other maternity support programs and in primary care during prenatal and well child care visits: # (%) moms # (%) children 0-12 years
Improve mental health status and functioning of at risk moms and their children	Results of clients' periodic screening over time: For adults: <ul style="list-style-type: none"> • Edinburgh Prenatal Depression Scale • PHQ-2 • PHQ-9 • GAD-7 (anxiety) For children: <ul style="list-style-type: none"> • ASQ-SE • Pediatric Symptom Checklist Major mental health and medical diagnoses of clients
Improve capacity to reduce risk and address early symptoms of depression	# (%) Adult clients attending peer support groups or receiving other early intervention strategies during pregnancy or early in parenting years (0-3 years)
Improve primary care capacity to treat mental health issues	# (%) Clients receiving treatment and follow-up through integrated behavioral health programs <ul style="list-style-type: none"> • # (%) moms • # (%) children 0-12 years
Assure access to interventions for diverse pregnant women, mothers, and their children	Demographic profile of clients served in pilot projects: <ul style="list-style-type: none"> • Race / Ethnicity • Residence • Age • Insurance status • Housing status

Oral Health Pilot

Washington Dental Services hired three additional outreach workers who have begun intensive outreach efforts to get the word out about the KC Kids Dental Program. A PSA radio spot began broadcasting in January and will play for three months, and on the ground, outreach efforts are targeting schools and child care centers as a first focus. A website has been developed and is operational at www.kckidsdental.org. As of January 25, 2008, there are 41 children enrolled in the program.

Appendix B
Health Innovation Implementation Committee
M & E Status Report – February 2008



DSHS Timeline for Online Enrollment

Appendix B

HIIC Meeting Summary, September 24, 2007

The meeting was held from 1 pm to 3 pm in the 1311/1312 Rooms of 401 Fifth Ave, Seattle, Public Health-Seattle & King County.

Committee Members, Observers and Staff Attending: Tom Byers, Nancy Carey, Abie Castillo, Ben Danielson, Jon Gould, Patty Hayes, Kay Knox, Laurel Lee, Karen Merrikin, Claudia Sanders, Charissa Fotinos, Laura Smith, Cindy Snyder; Dorothy Teeter, Debbie Wilkinson, Hillary Chisholm, Judy Clegg, Hugh Ewart, Sarah Hopkins, Susan Johnson, Lisa Podell, Rachel Quinn, Susan Thompson, Kirsten Wysen

The Health Innovation Implementation Committee meeting got underway with a welcome and review of the central purpose of the meeting and agenda from meeting facilitator, Judy Clegg. Clegg distributed copies of the committee's charter. As an update on state and federal children's health advocacy issues, Kirsten Wysen, Policy Analyst, gave a brief overview of the current activities flowing from the implementation of the Children's Health Act in the areas of medical home, pay for performance and online capability as well as highlighting elements of the federal debate surrounding the reauthorization of the State Children's Health Insurance Program (SCHIP). The House and Senate have voted to reauthorize and expand the program which expires on 9/30/07, however the President has threatened to veto any reauthorization bills that include a program expansion. The Senate has enough votes to override a presidential veto and the House vote on the reauthorization bill is expected on Tuesday, September 25. Hugh Ewart, Community Health Network of WA, provided information about current efforts to convince the Washington State Congressional delegation to support SCHIP.

Lisa Podell, Program Manager, provided an update of the county-funded outreach activities in King County. She reported that since January, 2007, the outreach and linkage staff have signed up 875 new children for state coverage, with about 40% enrolled in the Children's Health Program and 60% in Healthy Options and Medicaid fee-for-service. Given this progress so far, it seems that the goal of 1,000 enrolled by year's end will be exceeded. Only a handful of those signed up have had incomes over 200% FPL and have been enrolled in SCHIP. In addition, outreach and linkage staff have provided trainings about preventive services to 2,800 parents, exceeding the goal of training 1,500 parents. They have provided trainings on well child visits, developmental issues and oral health practices to 1,800 community agency staff, surpassing the goal of 1,000 staff members. HIIC members asked if teens have been targeted for outreach and Podell responded that at least one of the outreach sites targets teens. Another member recommended summarizing lessons learned in King County outreach activities to help inform the design and implementation of state outreach efforts.

The State's outreach planning process was discussed. Highlighted was the depth of linkage activities available in King County (in addition to the enrollment activities) due to the influx of the CHI County funded \$1m. This is likely not going to be evident state-wide due to the focus on per enrollment payment rather than infrastructure development and the limitations in spreading \$4m across the state.

Susan Johnson reported on progress in raising \$1 million in matching funds for the Group Health and Washington Dental Service contributions to the King County Children's Health Initiative (CHI). Susan said fundraising had been going well with other health plans and hospitals and that the goal of the additional \$1 million was only \$11,200 short. She thanked Group Health and Washington Dental

Service, CHP, Molina, WSHA and the King County Council for their leadership in supporting children's health in the county. Susan was confident that the goal would be met by the deadline called for in the agreements.

Judy Clegg reviewed the HIIC Charter with the group. There was a motion by Patty Hayes to approve the charter, seconded by Karen Merrikin and unanimously adopted by the committee.

Public Health-Seattle & King County staff provided updates about three pilot projects currently being designed for the CHI. Kirsten Wysen provided a summary of the activities planned to promote the use of online transactions for families and children with public coverage. PHSKC staff have been working with WithinReach staff to develop three ways to expand and support the www.ParentHelp123.org website. The first effort will pilot the technical and policy development of an electronic link between ParentHelp123 and the Department of Social and Health Services (DSHS). This link could occur through fax, PDF file transfer or direct electronic submission to DSHS databases. The second effort will develop a "super user" version of ParentHelp123 so that application and outreach workers can quickly scroll through a shorter version of the website when they are assisting families in signing up for coverage. The third part of the project would create a way for families enrolling in new subsidized dental coverage to apply online. The PHSKC staff also are working with DSHS' Economic Services Administration on their update of the Online CSO. Finally, PHSKC will host a site visit from three staff from the California Center for Promoting Healthcare Access to help educate and inspire Washington State parties interested in online applications, renewals and other transactions. The Center for Promoting Healthcare Access operates the Health-e-App and One-e-App websites, www.oneeapp.org.

HIIC members asked if the Governor's office had received a demonstration of ParentHelp123, and Patty Hayes responded that she had completed a demo for Medicaid staff and that she planned to do so for the DSHS upper management and Governor's Office as well. WithinReach reported that they will have a Spanish version of ParentHelp123 available by the end of 2007 and that they are very interested in developing capability to recertify enrollees online. The HIIC group was asked to provide additional feedback to Kirsten Wysen, Kirsten.wysen@kingcounty.gov.

Susan Thompson, Program Manager, provided an overview of the Washington Dental Service-funded dental pilot project and "Buy In" option for families above 300%FPL. This project will develop a dental coverage option for children in families earning between 250 and 300% FPL. The subcommittee has begun working on an outreach and marketing approach and believes having an online application will be a great benefit to enrollment. Laura Smith described the approach which is based on Delta Dental's experience in Michigan which accessed a preferred provider organization (PPO) network and paid commercial rates for Medicaid children to eliminate the stigma of Medicaid and to improve utilization and access to dental care. The subcommittee is working to develop estimates of how many children between 250 and 300% FPL do not have dental coverage and how to efficiently determine eligibility for the group, which will segue to state coverage in January 2009, when the Cover All Kids Law extends to that income eligibility group.

HIIC members commented that the approach seemed to move away from a two-tier health care system toward demonstrating the feasibility of a single system that did not depend on enrollee income. Another HIIC member asked if families could enroll in the new King County dental program and private medical coverage at the same time and WDS responded that they could. The HIIC committee members recommended that the pilot project use the same family composition and income determination rules as Medicaid so that the families could easily transition to state coverage after January 2009. HIIC

members recommended that the outreach and marketing approach rely on promoting good oral health care for all rather than focusing on attracting a very narrow income eligibility group. The HIIC group was asked to provide additional feedback to Susan Thompson, susan.thompson@kingcounty.gov.

Sarah Hopkins, Project Manager, provided a description of the mental health pilot project which will evaluate the effectiveness of behavioral health specialists in primary care settings using mental health screening tools for maternal depression and childhood behavioral and mental health issues for children ages zero to 12. Sarah described the initial research the subcommittee collected from several mental health projects on-going in King County and Washington State, including projects that have co-located mental health specialists in primary care settings, such as Impact UW, Odessa Brown Children's Clinic, High Point Community Health Center, and Community Health Centers of King County. Dr. Neil Baker has been especially helpful in briefing the subcommittee on standard depression screening tools. He is working with a NICHQ collaborative on children's mental health.

The behavioral health pilot project plans to fund two-four demonstration sites for two-three years for embedded behavioral health services at primary care clinics. The demonstration sites will provide family-centered care with regular screening and evaluation in the primary care setting. A stepped care model will be used, with access to consultative psychiatric services when needed. The sites will develop registries to make sure that those identified by screening are offered appropriate interventions. The project will identify barriers to wider implementation and provide recommendations about how to make the approach sustainable. This pilot project will closely align with other efforts in King County. Please send comments about the approach to Sarah Hopkins, sarah.hopkins@kingcounty.gov.

The HIIC members discussed the special challenges foster children face when being screened for mental health problems and provided services. There was some discussion about reframing the behavioral health pilot project towards foster children, but the group thought the current approach should proceed with the understanding that foster children could be addressed at a later date. Dr. Nancy Anderson, DSHS, is a good resource for many attempts in the state to develop better health care systems for foster children.

Having concluded the review of the focus for each of the three pilots, HIIC members were reminded by Judy Clegg that they were then approving these directions and asking that each of the pilots report back at the November meeting with a more detailed workplan, measures and evaluation design and a preliminary budget.

The next HIIC meeting will be on Friday, November 16 from 9 am to 11 am in Rooms 117, 119, 120 First Floor of the KCNOB, 401 Fifth Avenue.

Appendix B

HIIC Meeting Summary, November 16, 2007

The meeting was held from 9:30-11:05 am in rooms 117, 119, 120 of The Chinook Building on 401 5th Ave, Seattle, WA 98104.

Committee Members, Observers and Staff Attending: Nancy Carey, Darlene O'Neill, Judy Clegg, Claudia Sanders, Kay Knox, Meredith Vaughn, Dorothy Teeter, JoAnn Whited, Karen Merrikin, Abie Castillo, Rachel Quinn, Sarah Hopkins, Lisa Podell, Kirsten Wysen, Susan Thompson, Susan Johnson, Aida Mengistu.

Judy Clegg, facilitator, opened the meeting by stating the purpose of the meeting which was to review and consider adopting the workplans, budgets and evaluation measures for the three King County Children's Health Initiative pilot projects, the designs for which were initially presented at the previous HIIC meeting held on Monday, September 24, 2007. The focus of the three proposed pilot projects are online enrollment, oral health and mental health. As is customary, the meeting began with updates on overall advocacy, outreach, funding and evaluation.

Kirsten Wysen gave the advocacy update. She distributed a handout from the "Health Coalition for Children and Youth" describing the SCHIP reauthorization which is still under negotiation. At the state level, DSHS will be releasing a report on children's medical homes and performance measures which will be made public by mid to end December. Claudia Sanders added that there is currently no funding to support the report's recommendations.

Lisa Podell gave the update on outreach. 1,808 applications for health coverage have been submitted and 1,056 have been approved as of November 2007. Many of these children have been connected to medical homes and dental homes. Lisa distributed a graph "2007 CHI Applicants" which showed that the number of applicants has exceeded expectations. Lisa also distributed a handout called "CHI Objectives and Outcomes 2007" and gave definitions of the terms "medical home" and "dental home."

Susan Johnson reported that the terms of the Group Health Cooperative and Washington Dental Service challenge grants have been met and exceeded with 19 contributors donating a total of \$1,000,300. King County Executive Ron Sims and the funders held a press conference and celebration for accomplishing the fundraising goal on October 25, 2007.

Judy Clegg provided an overview of the budget. Lisa Podell went over the budget handout: "CHI Outreach and HIIC Pilots Budget 2007-2011". Lisa clarified that county money is separate from the budget money reflected on the handout. The pilot projects are funded by private funds.

Online Enrollment – Kirsten Wysen has been working with Within Reach (JoAnn Whited and Kay Knox). The plan to build on existing online enrollment capacity is to fund two projects through Within Reach (one to create an electronic connection between ParentHelp123.org and the state and the other to develop a super-user version of the ParentHelp123 website. In addition, both King County and WithinReach staff are participating in the current efforts to redevelop the state's Online CSO. Kirsten gave out handouts "KCCHI – Online Pilot Project Budget", "HIIC Measures and Evaluation Plan" and "CHI Online App E-Submission Pilot Project Work Plan".

JoAnn Whited went over the workplan in detail. She stated that the main challenge that would be to figure out the best way of creating an electronic interface with the state and how privacy and security policies would be incorporated. The technical part of creating the connection is the “easy” part. She also reviewed the steps needed to create a Super user Pilot for use by outreach workers. Kirsten Wysen gave a brief recap of the California One-app site visit on November 6, 2007. The One-e-App staff who traveled to Olympia—Claudia Page, Bobbie Wilbur and Ashok Rout—provided many ideas and shared their ten years of experiences in developing the California online application.

Following review and discussion, the HIIC unanimously approved the workplan, budget and evaluation plan for the Online Enrollment pilot project.

Oral Health – Susan Thompson has been working with WDS (Darlene O’Neill and Nancy Carey), which will be funding and administering the oral health pilot project. Nancy Carey walked the committee through their workplan. WDS is marketing the program by advertising through TV and radio. She reviewed the proposed budget and evaluation measures.

Following review and discussion, the HIIC unanimously approved the workplan, budget and evaluation plan for the Oral Health pilot project.

Mental Health – Sarah Hopkins started the presentation. She stated that it was envisioned to be a 4-year project to dovetail with related mental health opportunities in the County. Lisa Podell went over the budget. The bundling of program with King County’s maternal depression pilot projects was discussed. Meredith Vaughn said the community health centers appreciated that the county would be releasing on Request for Proposals (RFP) for both the maternal depression and children’s mental health pilot projects. She also asked what was known about the target population’s access to a computer for online applications. This was discussed briefly as something that was taken into consideration when developing the projects. Meredith thanked the subcommittee for their work in producing such a helpful set of documents. Following review and discussion, the HIIC unanimously approved the workplan, budget and evaluation plan for the Mental Health pilot project.

Having approved each of the elements for each of the three pilot projects, Judy Clegg brought the group back to the overall Budget document reviewed at the outset of the meeting to see if anyone had any new or additional questions or concerns. Hearing none, the overall Budget as presented was unanimously approved. There was enthusiastic discussion and support for “writing up” the work of the CHI to include both the assertive outreach combined with creatively leveraged pilot projects that dovetail with County and State efforts. Discussion also embraced the need to collect stories of lives affected by this work “as we go along.”

Judy Clegg closed the meeting at 11:05am by commending everyone’s good work. She announced that the next meeting will be held tentatively in February 2008.

Appendix B

HIIC Meeting Summary, February 5, 2008

The meeting was held from 10:00 am -12:00 pm in room 126 of The Chinook Building on 401 5th Ave, Seattle, WA 98104.

Committee Members, Observers and Staff Attending: Dawn Smart, Teresa Mosqueda (via phone), Abie Castillo, Claudia Sanders, Joann Whited, Kay Knox, Nancy Carey, Darlene O'Neill, Marina Espinoza, Rachel Quinn, Tom Byers, Meg Crager, Kelli Carroll, Theresa Tamura, Katie Ross, Anne Shields, Lisa Podell, Kirsten Wysen, Susan Thompson, Susan Johnson, Aida Mengistu.

Due to Judy Clegg being ill, Susan Johnson, acted as facilitator and opened the meeting by reviewing the agenda and materials emailed out ahead of time, the HIIC 2008 Workplan and the HIIC Measurement and Evaluation Status Report. Additionally Susan distributed copies of the new CHI informational piece that was created for the Legislative Conference. She stated that the purpose of the meeting was to hear a measurement and evaluation status report and review the 2008 work plan and meeting schedule for the three King County Children's Health Initiative pilot projects. As is customary, the meeting began with updates on overall advocacy, the progress of the pilots, outreach and funding .

Kirsten Wysen gave the advocacy update and reported on the five year plan now proposed by the Department of Social and Health Services to implement the medical home components of the Cover All Kids law of 2007 (5093). Kirsten also gave an update about the federal funding situation in DC with the failure again of Congress to collect enough votes to override a presidential veto to expanded SCHIP funding. The President's budget also proposes funding cuts to CDC, NIH and other health programs. Lisa Podell elaborated on the Medicaid Match funding for linkage with schools that is in jeopardy due to new CMS rules that were imposed with little public comment opportunity. Teresa Mosqueda relayed that the HCCY agenda continues to move ahead in Olympia with its funding priorities for this session.

Susan Thompson introduced the update on the Oral Health pilot. She stated that the website, kckidsdental.org, is now live and includes an online application. Outreach efforts targeting schools are going well, as is a focus on child care centers. Nancy Carey added that the process is going very well and that linkage will soon occur with ParentHelp123.org. She reminded everyone that 92.5 FM radio is advertising the program. To date there were 55 kids enrolled with the website having received 229 "hits" in January. There were 69 online enrollment referrals from the radio.

Darlene O'Neill also gave an oral health outreach update. There are 3 outreach workers in North, South and Central King County. Targeting schools and day care centers is a focus for dispensing flyers. Efforts have been strengthened by giving out pencils and toothbrushes. 30,000 flyers and 11,000 toothbrushes were given out in January. Out of the last 11 kids enrolled, 7 were referred from schools. Susan Thompson stated that they've added a couple of outcomes: evaluating outreach and a family satisfaction element to be further discussed in the measurement and evaluation part of the agenda.

Kirsten Wysen gave the online update reminding folks that there are 2 projects ahead for 2008: 1) electronic linkage with ParentHelp123 and DSHS and 2) a "super user" version of ParentHelp123 streamlined for outreach workers. She stated that as far as the DSHS online application is concerned, the business requirements are complete after many meetings in Olympia. She also pointed to intent of the state to meet the deadlines contained in the timeline included in the materials but mentioned that

additional advocacy might be needed to avoid delays to the schedule. It is now planned that DSHS will debut their Online CSO website in July of 2008. Patty Hayes commented on the importance of the e-signature issue with Tom Byers asking if additional political pressure might be needed.

Lisa Podell opened the update on the mental health pilot stating that the Mental Health committee had decided to combine funding with the Vets and Human Services Levy's Maternal Depression pilot since both programs focused on maternal depression. The combined effort is titled *Piloting Program Strategies for Maternal and Child Behavioral Health Services*. Anne Shields commented that it's very exciting to have the funding – which, combined with the Veterans' Levy, will yield just over \$600,000 per year for 5, 4-year programs. An RFP regarding site selection is was released on February 25th.

Susan Johnson referenced the Outreach activities funded by King County Council at \$1 million in each of the years 2007, 2008 and 2009 and that the private funding raised for the 2008 pilot projects had been appropriated by the Council.

Lisa Podell provided 2 handouts: 1) a chart showing that the number of kids enrolled in 2007 was 1420 and 2) a chart of expected outcomes for 2007 showing all had been met or exceeded. A big emphasis is providing education to parents regarding the value of prevention, and decreasing cultural barriers to accessing services. A data share agreement with DSHS has just been finalized after months of work so that soon we will be able to track the number of medical and dental homes achieved. The state is working on a re-branding program, the messages for which we will incorporate with in our work in the County and we are hopeful that the state will remain open to moving towards express/presumptive eligibility. King County Council members and the Executive are interested in participating in outreach events and potentially doing some Public Service Announcements for the CHI. Tom Byers inquired as to the persistent existence of separate children's plan "silos", and expressed hope that an appointment of a Children's Health "Czar" would hasten integration and expedition of all our efforts on implementation.

Susan Johnson introduced the section on the Measurement and Evaluation Status report and turned the discussion over to Dawn Smart of Clegg and Associates. Dawn reviewed the planned activities to evaluate each of the pilots (online, mental and oral health) individually and as a whole, along with the CHI outreach activities. Claudia Sanders urged that we aim high in what we capture so that there is a "roll up" to results regarding the ramifications of accessing insurance and services that are tangible at the County level. Similarly, Tom Byers urged that we develop an even simpler roll up for our audience at the state level to show the bottom line of what all of this leads to – e.g.: "Do immunization rates improve with a medical home?" "Can we show a decrease in ER use with a corresponding increase in establishment of medical homes?" There was much discussion about how to communicate these kinds of "big picture" evaluation measures over 3 years and capturing the "cost avoidance" results that are attractive to folks in Olympia.

It was suggested that we look again at the evaluation used in California and also to try to do more of the family satisfaction type interviews, as had been added in the Oral Health Pilot, perhaps expanding to include also in the Online pilot set of measures as these might be very influential in moving the Sate ahead with spreading of our pilot efforts. A caution was added by Abie Castillo not to shortchange the focus on implementing the current projects, by putting too much effort into evaluation. Planning ahead for how to best communicate evaluation results of the CHI, with messages geared for both County and State audiences was recommended by several members of the HIIC.

Discussion concluded with acceptance of the Measurement and Evaluation Status Report encompassing also the need for the “big picture” thoughts raised in the discussion.

The 2008 Workplan and Meeting Schedule was reviewed and accepted.

Collecting stories to augment the quantitative evaluation results was again underscored as important to record and likely will be a part of a second CHI piece to be developed to demonstrate the effectiveness of the pilots.

The meeting was adjourned at 11:30 am.

In accordance with the 2008 Workplan and Meeting Schedule, the next meeting will be held tentatively in May, 2008.

Appendix B

HIIC Meeting Summary, May 29, 2008

The meeting was scheduled for 10:00 am - noon in room 126 of The Chinook Building on 401 5th Ave, Seattle, WA 98104.

Committee Members, Observers and Staff Attending: Judy Clegg, Dawn Smart, Karen Merrikin, Abie Castillo, Lisa Yohalem, Laura Smith, JoAnn Whited, Rachel Quinn, Tom Byers, Marilyn Andrews, Lisa Zerda, Anne Shields, Lisa Podell, Kirsten Wysen, Susan Thompson, Susan Johnson

Judy Clegg called the meeting to order at 10:10 am stating that the main focus of the meeting was to review plans for the annual Measurement and Evaluation Report for CHI including the addition of some “big picture” measures as a follow up to the discussion at the last HIIC meeting in February. Following introductions, Judy then moved to the agenda item on Progress Reports.

Susan Johnson shared with the group that she had given an interview with Gary Davis of KPLU who was keying off of the recently released Commonwealth Fund Report listing Washington State as 18th in relation to indices of child health. The interviewer was interested in the King County experience of improving health via the Children’s Health Initiative and its relationship to the statewide efforts under the Cover all Kids statute and its intention to reach that goal by 2010. Susan also announced that she had also received an unsolicited communication from Retailigent, a teeth whitening business, offering to contribute to the CHI after it opens its store(s) in King County later this year.

Susan also underscored the themes for this meeting and the Evaluation Report as stressing alignment with audiences both at the County and State levels. In that regard Susan reported having had conversations with both Rep Eileen Cody and Rep Bill Hinkle who were interested in the progress of the CHI and seemed open to a presentation about it at a fall legislative weekend. Susan mentioned also that King County Executive Ron Sims, Council Chair Julia Patterson, and CHI prime sponsor and past Budget Chair, Councilmember Larry Gossett, were to be honored by Group Health CEO, Scott Armstrong with awards for community leadership on CHI at the Communities Connect Conference, June 2-3.

Speaking about advocacy and alignment at the state and federal levels, Lisa Podell then highlighted the issues of positive support at the state level for moving to coverage of children up to 300% FPL in January 2009 as called for in the Child Health statute and indicated that there was also support at the state level for the moratoria on federal HRSA directives that were now before Congress.

Kirsten Wysen reported on a meeting sponsored by the Health Coalition for Children and Youth with Medicaid Director Doug Porter and his staff regarding the full implementation of the Cover All Kids law of 2007. Items of discussion included the need for on-going funding for outreach after July 2009, funding medical homes for children and the lack of progress with an online application. At the meeting, Medicaid staff indicated they would be interested in hearing about CHI evaluation findings at the Children’s Health Improvement System (CHIS) meetings, which address medical homes and health improvements for children in public programs. Tom Byers added that a more deliberate implementation

of the Cover All Kids law would have had a designated lead assigned to coordinate various parts of the implementation.

Abie Castillo asked about the status of immigrant children and indicated this is a topic that will need follow-up.

Turning next to updates on outreach and enrollment, Lisa Podell provided two handouts to the group showing the current numbers on applications and the progress on meeting CHI stated Objectives and Outcomes for the outreach effort – all measures are on track to meet or exceed the targets. Lisa reported that the new *promotoras* program had begun and that the data share agreement with the state was now completed so that numbers of children actually making it through the medical and dental clinic doors would now be tracked.

Moving to the Progress on the Pilot Programs, Judy asked Kirsten Wysen to report on the online enrollment pilot. Kirsten distributed a status report highlighting steps that were underway to move toward a “true” electronic submission to the State but that some delays have been encountered due to the state’s timeline with instituting the new Online CSO and Provider One, their new provider and member information system. Kirsten also distributed an article from the *Puget Sound Business Journal* on ParentHelp123 authored by Jill Sells. JoAnn Whited, Program Manager at WithinReach for ParentHelp123, reported on the site visit to California to meet with the “One-e-app” staff and gave further detail as to the state’s intentions and timeline. JoAnn reported that WithinReach held focus groups in Yakima to test the Spanish version of ParentHelp123 before it goes live statewide.

Tom Byers offered to be of assistance in helping to spread the word about the electronic submission progress and possibilities to mainstream press in King County and Karen Merrikin suggested that if a presentation is achieved with Reps Cody and Hinkle that a demonstration of online progress and capabilities be highlighted.

Anne Shields then reported on the behavioral health integration work in King County of which the CHI is a part. Anne distributed a three page summary of activities and highlighted that Valley Cities Mental Health was providing psychiatric consultation for children and adults and that a goal was for universal screening for maternal and child issues. Discussion also included more specifics on the GA-U (General Assistance-Unemployable) pilot and the potential for its results to inform this pilot.

Susan Thompson reported on the oral health pilot and distributed a sheet highlighting the success to date in the KC KIDS dental program with 413 children enrolled as of the end of May 2008. Laura Smith underscored the finding of interest to the state so far is that adverse selection into this program is not being evidenced by the fact that costs for preventive vs restorative services are not that far apart. Laura also reported that the state is interested in seeking a fix for a problem brought to light by the CHI oral health pilot which is that unlike Medicaid, an entitlement program, children eligible for SCHIP who have medical coverage but not dental, are NOT allowed to pick up the dental only coverage. This would require a waiver to fix which it is hoped that the state will request and for which we will advocate. The buy in option for the children in families above 300% FPL would also touch on the waiver issue. Laura also indicated that, like the KC KIDS dental pilot, the Michigan model being explored with the state decreases the issues of stigma for the families and administrative hassle factors for the providers. Early discussions with the state on these program elements have begun.

Judy then framed the Evaluation discussion in light of the alignment and audience factors mentioned earlier and turned the discussion to Dawn Smart to review the two handouts on the evaluation framework and the big picture measures.

The group discussed the framework and the high level measures with the comments and clarifications in the following areas: underscore that CHI is more than the outreach and linkage and includes the combined value and effects of the pilots, so that needs to be shown both separately and in the “roll up;” interest in if there would be information about how many multiple services, in outreach and pilot areas, might have been accessed by individual families; clarification about the terminology of just enrolled vs already enrolled; and clarification of what was encompassed by “ease of access” in the last measure. Rachel Quinn asked how the families would be selected to be interviewed and Dawn replied that the same method as was used in California would be employed, where new enrollees were compared to those who had enrolled one year earlier. The new enrollees represent families who were previously uninsured and those enrolled for one year reflect the effect of the new coverage.

The meeting was adjourned at noon.

The next meeting will be July 10, 2008 10:00 am-noon primarily to review a draft of the annual CHI Measurement and Evaluation Report.

Appendix B

HIIC Meeting Summary, July 10, 2008

The meeting was scheduled for 10:00 am - noon in room 126 of The Chinook Building on 401 5th Ave, Seattle, WA 98104.

Committee Members, Observers and Staff Attending (some by phone): Judy Clegg, Dawn Smart, Jeff Sakuma (for Karen Merrikin), Abie Castillo, JoAnn Whited, Sharon Beaudoin (for Patty Hayes), Tom Byers, Marilyn Andrews, Christina Hulet, Teresa Mosqueda, Darlene O'Neill, Claudia Sanders, Anne Shields, Lisa Podell, Kirsten Wysen, Susan Thompson, Susan Johnson

Following introductions and announcements, Judy Clegg called the meeting to order at 10:10 am stating that per the agenda, the main focus of the meeting was to review the most recent draft of the annual Measurement and Evaluation Report due to be transmitted to the King County Council August 15.

Dawn Smart led the group through the draft section by section to collect thoughts and comments to strengthen the report. The following are summary comments exemplifying the points raised during this review:

- Strengthen the Executive Summary so the strengths and achievements to date are brought out and not buried and hard to find
- Think of both the state and the county audiences for bolding pieces that each will be looking to discover
- Give more attention to the data share agreement as a model for the state to replicate
- Take more credit for leadership at the state level
- Bring out and forward into the Executive Summary the enrollment and linkage numbers and charts as well as the measures to be gathered in 2009 to show the combined impact of the totality of the CHI

Following this review, Tom Byers moved and the Committee unanimously voted, to endorse the report as amended in discussion together with any related issues that come forward from the access and Outreach Committee's review.

Implementation Updates were next on the Agenda.

Kirsten Wysen reported on the recent "One Table" meeting at which priorities for continuing expansion of coverage to the 300%FPL families was confirmed along with efforts for continued outreach and linkage and health promotion. Tom Byers suggested that the group continue to attend to the need for a complementary administrative agenda to assure that implementation is not slowed due to administrative barriers. Federal efforts to continue the moratoria on the HRSA rules implementation was reviewed as were plans for the upcoming state media tour the Governor is planning to draw attention to the newly named Apple Health for Kids health program and enrollment efforts.

Joann Whited reported on progress in the Online enrollment pilot with particular attention given to the discussions with HRSA and ESA regarding varying requirements for signatures. Tom Byers again underscored the need for an administrative oversight review when situations of this nature come to light.

Teresa Mosqueda reminded the group of quarterly meetings the Children's Alliance has at leadership levels and would bring these issues forward at those opportunities.

Anne Shields reviewed the progress to date in the behavioral health pilot are with implementation now underway. Brief discussion occurred regarding the mental health activities in King County and the relationship to the mental health transformation efforts at the state level with Abie Castillo also a member of the state wide group.

Darlene O'Neill gave the group an update on the KCKids dental pilot showing now that 495 children had been enrolled, nearly one half of the target number of 1,000; with over 1,700 "hits" to the website and that Sound Publishing was going to provide inserts of the KCKids flyer in its publications going to 300,000 readers.

Judy Clegg closed the meeting with a review of the timeline for changes to be made to the draft based on today's discussion and that the next meeting of the HIIC Committee would likely be in September with a date to be chosen at a later time. The meeting adjourned at noon.

Appendix B – HIIC Member Roster

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Last

Updated:

06/05/08 7/8/2008

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